37505.0298

I hereby certify that this Correspondence is being forwarded to: Commissioner for Patents, Alexandria, VA 22313-1450, on October 22, 2004, via fax phone number 703-872-9306.

Michael F. Scalis

Date of Signature

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED **CENTRAL FAX CENTER**

In re application of

Mileham et al.

OCT 2 2 2004

Serial No.

10/737,062

Filed

December 16, 2003

For

Dual Anode Capacitor Interconnect Design

Examiner

A. Dinkins

Group Art Unit

2831

Mail Stop Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT UNDER 37 CFR 1.111

Sir:

In response to the Office Action dated October 18, 2004, the Applicants amend and remark as follows:

10/22/2004 NROCHA1 00000004 10737062

)1 FC:1201)2 FC:1202 352.00 OP 18.00 OP

PAGE 1/14 ° RCVD AT 10/22/2004 9:44:18 AM (Eastern Daylight Time) ° SVR:USPTO-EFXRF-1/1 ° DNIB:8729306 ° CSID:716 759 5815 ° DURATION (mm-4s):04-42

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 10-737062

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			· ·		(COIGINITE)			RATE	FEE	О 1	RATE	FEE
			<u> </u>									
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			2 minus 20=		• 1			X\$ 9=	- 1	OR	X\$18=	18
INDEPENDENT CLAIMS) minus 3 =		Φ			X43=		OR	X86=	
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT		· · · · · ·			+145=		OR	+290=	
* If	the difference	in column 1 is i	ess than zero, enter "0" in o			olumn 2	ı	TOTAL		OR	TOTAL	788
CLAIMS AS AMENDED - PART II											OTHER	THAN
1()-22-04 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	NTITY
AMENDMENT A	_	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 27	Minus	4	a	- 5		X\$ 9=		OR	X\$18=	90
	Independent	*)	Minus	***	7		[X4 \$ =		OR	X8 6 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ 1546=		OR	+240=	
								TOTAL		0.0	TOTAL	
ADDIT, FEE ADDIT, FEE												
		(Column 1) CLAIMS	<u> </u>	HIGH		(Column 3)	7 г		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER		NUM! PREVIO		PRESENT EXTRA		RATE	TIONAL		RATÉ	TIONAL
		AMENDMENT		PAID			Į ļ		FEE			FEE
	Total	*	Minus	**		=] [X\$ 9=	:	OR	X\$18=	
	Independent	*	Minus	***		<u> </u>	11	X43=		OR	X86=	(
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		J	+145=		00	+290=	
							L	TOTAL		OR	TOTAL	
TOT ADDIT. F										OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X43=		ÓR	X86=	
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╛┞					
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE												L
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												